Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	John First name  M Middle name  Hughes Last name and Suffix (Sr., Jr., II, III)	- - -	Leona First name  E Middle name Hughes Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4055		xxx-xx-4591

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	■ I have not used any business name or EINs.  Business name(s)
		LIIVS	LINS
5.	Where you live	8 Andes Trail West Berlin, NJ 08091	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		County County	County
		·	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 1 <b>John M Hughes</b> btor 2 <b>Leona E Hughes</b>			Case numb	DET (if known)
Par	Tell the Court About	Your Bankruptcy C	ase		
7.	The chapter of the Bankruptcy Code you are		brief description of each, see <i>Notice</i> , go to the top of page 1 and check		342(b) for Individuals Filing for Bankruptcy
	choosing to file under	☐ Chapter 7			
		☐ Chapter 11			
		☐ Chapter 12			
		Chapter 13			
		— Ghaptor To			
8.	How you will pay the fee	about how y order. If you a pre-printed	ou may pay. Typically, if you are par r attorney is submitting your paymed address.	aying the fee yourself, you int on your behalf, your atto	elerk's office in your local court for more details may pay with cash, cashier's check, or money orney may pay with a credit card or check with a attach the Application for Individuals to Pay
		The Filing F	ee in Installments (Official Form 10	3A).	a attach the Application for Individuals to Fay
					are filing for Chapter 7. By law, a judge may, s less than 150% of the official poverty line
		that applies	to your family size and you are una	ble to pay the fee in install	lments). If you choose this option, you must fill
		out the <i>App</i>	ication to Have the Chapter 7 Filing	g Fee Waived (Official Forn	n 103B) and file it with your petition.
9.	Have you filed for	<b>-</b>			
J.	bankruptcy within the	■ No.			
	last 8 years?	☐ Yes.			
		District		nen	Case number
		District		nen	Case number
		District	Wr	nen	Case number
10.	Are any bankruptcy cases pending or being	■ No			
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.			
		Debtor			Relationship to you
		District	Wi	nen	Case number, if known
		Debtor			Relationship to you
		District	WI	nen	Case number, if known
11.		■ No. Go to	line 12.		
	residence?		our landlord obtained an eviction iu	dament against vou and d	o you want to stay in your residence?
		Tes.	No. Go to line 12.	. J - 2 2.go. y ou allu u	
				out an Eviction Judgment A	Against You (Form 101A) and file it with this
		Ц	bankruptcy petition.	at an Eviduon daugment P	ngamot rou (i omi to iry and ille it with this

Deb	tor 2 <b>Leona E Hughes</b>				Case number (if known)		
Par	Report About Any Bu	sinesses	You Owi	n as a Sole Proprieto	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of busi	ness		
	A sole proprietorship is a						
business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.				e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	ber, Street, City, State	e & ZIP Code		
	it to this petition.		Chec	k the appropriate box	a to describe your business:		
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation in 11 U.S	s. If you ins, cash-f S.C. 1116	ndicate that you are a flow statement, and for (1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	No.	i am	I am not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am	filing under Chapter 1	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	/ Hazard	ous Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	is the property?			
					Number, Street, City, State & Zip Code		

Debtor 1 John M Hughes

Debtor 1 John M Hughes
Leona E Hughes

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

☐ **Disability.** My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi
counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

☐ Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	Debtor 1 John M Hughes Debtor 2 Leona E Hughes Case number (if known)				wn)			
Part	6:	Answer These Questi	ons for Rep	orting Purposes				
16.		kind of debts do nave?	ir C -	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.				
			16b. <b>A</b>	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  □ No. Go to line 16c. □ Yes. Go to line 17.				
				state the type of debts you owe that	at are not consu	mer debts or bu	isiness deb	ts
17.		ou filing under ster 7?	■ No.	am not filing under Chapter 7. Go	to line 18.			
	after prop admi are p be av distr	ou estimate that any exempt erty is excluded and nistrative expenses aid that funds will vailable for bution to unsecured tors?	е	am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative xpenses are paid that funds will be available to distribute to unsecured creditors?  No Yes				
18.		many Creditors do estimate that you	■ 1-49 □ 50-99 □ 100-199 □ 200-999	199 ☐ 10,001-25,000 ☐ More than 100,000				□ 50,001-100,000
19.	estin	much do you nate your assets to orth?	<b>\$100,00</b>	50,000				
20.		much do you nate your liabilities ?	<b>\$100,00</b>	50,000				
Part	7:	Sign Below						
For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					provided is true and correct.			
	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341,					erty by fraud in connection with a		
			1519, and 3	3571.	o,ooo, or implied	·	•	or boar. 10 0.0.0. 33 102, 1041,
			John M H Signature o	ughes		Is/ Leona E Hug Signature of D	ghes	
		Signature of Debtor 1 Signature of Debtor 2  Executed on January 20, 2016 Executed on MM / DD / YYYYY Executed on MM / DD / YYYYY						

For your attorney, if you are epresented by one  I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to procunder Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. §	Debtor 1 Debtor 2		•	Cas	e number (if known)	
epresented by one under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter						
	•	• • •	under Chapter 7, 11, 12, or 13 of title 11, United S	States Code, and have e	explained the relief a	available under each chapter
f you are not represented by 342(b) and, in a case in which § 707(b)(4)(Ď) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.  o file this page.	n attorn	ney, you do not need	ented by 342(b) and, in a case in which § 707(b)(4)(Ď) app	lies, certify that I have r	` '	, ,
/s/ William B. Sanderson, Jr. Date January 20, 2016			/s/ William B. Sanderson, Jr.	Date	January 20, 20	16

75/ William B. Sanderson, Jr.	Duto	January 20, 2010
Signature of Attorney for Debtor		MM / DD / YYYY
William B. Sanderson, Jr.		
Printed name		
Spear Wilderman PC		
Firm name		
1040 N. Kings Highway		
Suite 202		
Cherry Hill, NJ 08034		
Number, Street, City, State & ZIP Code		
Contact phone <b>856-428-8799</b>	Email address	kbrand@spearwilderman.com
Pa 59328		
Bar number & State		<del></del>

E:II :	n this inform	nation to identify your	c250:			
Debt		John M Hughes	case.			
		First Name	Middle Name	Last Name		
Debt (Spou	or 2 se if, filing)	Leona E Hughes First Name	Middle Name	Last Name		
Unite	ed States Ban	kruptcy Court for the:	DISTRICT OF NEW J	ERSEY		
1	e number					
(if kno	wn)				_	k if this is an nded filing
					amer	idea iiii ig
Off	icial For	m 106Sum				
			and Liabilities a	and Certain Statistical Information		12/15
infor	mation. Fill o original form	ut all of your schedule	es first; then complete	ole are filing together, both are equally responsible the information on this form. If you are filing amented the box at the top of this page.	for supply nded sched	ing correct lules after you file
					Your a	assets
					Value	of what you own
1.		B: Property (Official Fo			\$	230,000.00
	1b. Copy line	e 62, Total personal prop	perty, from Schedule A/I	3	\$	21,302.00
	1c. Copy line	63, Total of all property	y on Schedule A/B		\$	251,302.00
Part	2: Summa	rize Your Liabilities				
						iabilities nt you owe
2.			aims Secured by Prope		\$	81,800.00
		•		at the bottom of the last page of Part 1 of Schedule D.		01,000.00
3.			<i>Unsecured Claims</i> (Offic 1 (priority unsecured cla	ial Form 106E/F) ims) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured	I claims) from line 6j of Schedule E/F	\$	34,369.86
				Your total liabilitie	e ¢	116,169.86
				Tour total habilitie	<b>υ</b>	110,109.00
Part	3: Summa	rize Your Income and	Expenses			
4.	Schedule I: \	Your Income (Official Fo	orm 106I)			4 0 4 4 0 7
	Copy your co	embined monthly income	e from line 12 of Schedu	ıle I	\$	4,844.67
5.		Your Expenses (Official onthly expenses from line of the contract of the contr			\$	3,561.00
Part	4: Answer	These Questions for	Administrative and Sta	atistical Records		
6.	Are you filin	g for bankruptcy unde	er Chapters 7, 11, or 13	?		
	-	•	• • • • • •	Check this box and submit this form to the court with	your other s	chedules.
	Yes					
7.	What kind o	f debt do you have?				
				r debts are those "incurred by an individual primarily for-9g for statistical purposes. 28 U.S.C. § 159.	or a persona	l, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

page 1 of 2

Debtor 1	John M Hughes	
Debtor 2	Leona E Hughes	

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

6,888.44

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	395.37
9g. <b>Total.</b> Add lines 9a through 9f.	\$	395.37

Fill in ti	his information	on to identify your	case and thi		<b>3</b> -					
Debtor		ohn M Hughes								
Debtor 2		rst Name eona E Hughes	Middle I	Name		Last Name				
(Spouse, i		rst Name	Middle I	Name		Last Name		-		
United S	States Bankrup	otcy Court for the:	DISTRICT C	OF NEV	V JERSEY			_		
Case nu	umber					_				Check if this is an amended filing
Schon each cat fits bes	ategory, separa st. Be as comple	VB: Prop tely list and describe ete and accurate as	e items. List an possible. If two	marrie	d people are	an asset fits in more than on filing together, both are equ dditional pages, write your n	ally respons	sible for supplying	corre	ect information. If
		<u> </u>	·			wn or Have an Interest In				
	. Go to Part 2. s. Where is the p	oroperty?								
■ Yes	s. Where is the p	property?		What	is the prope	rty? Check all that apply				
1.1 <b>8</b> /	s. Where is the p	property?	n	What ■ □	Single-famil		amour	t deduct secured cla nt of any secured cla ors Who Have Clair	aims c	
1.1  8 A	s. Where is the p  Andes Trail eet address, if avail	able, or other description	091-0000		Single-famil Duplex or m Condominiu Manufacture Land	y home nulti-unit building or cooperative ed or mobile home	amour Credite	nt of any secured cla ors Who Have Clair nt value of the property?	aims c ms Se Cu	on Schedule D: cured by Property. rrent value of the rtion you own?
1.1 8 / Stree	s. Where is the p  Andes Trail eet address, if avail	able, or other description			Single-famil Duplex or m Condominiu Manufacture	y home nulti-unit building or cooperative ed or mobile home	Currer entire  Descri_(such	nt of any secured class who Have Clair on the value of the property? \$230,000.00 ibe the nature of y as fee simple, tens	cu cu cour o	on Schedule D: cured by Property.  rrent value of the rtion you own?  \$230,000.00
1.1 Stree  City	s. Where is the p  Andes Trail eet address, if avail	able, or other description	091-0000		Single-famil Duplex or m Condominiu Manufacture Land Investment Timeshare Other	y home nulti-unit building am or cooperative and or mobile home property  est in the property? Check one by	Currel entire  Descri (such a life e	nt of any secured clair ors Who Have Clair ont value of the property? \$230,000.00 ibe the nature of y	cu cu cour o	on Schedule D: curred by Property.  prent value of the rtion you own? \$230,000.00  wnership interest

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debtor 2	Leona E Hu	ghes	C	case number (if known)	
•	ans, trucks, trac	tors, sport utility ve	hicles, motorcycles		
□ No					
Yes					
0.4	e· Pontiac		W	Do not deduct secured of	claims or exemptions. Put
3.1 Make			Who has an interest in the property? Check one	the amount of any secure	ed claims on <i>Schedule D:</i>
Mode Year			Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
		105443	Debtor 2 only	Current value of the	Current value of the
	roximate mileage: er information:		■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	entire property?	portion you own?
	7 Pontiac G6		At least one of the deptors and another		
200	7 T OHUGO GO		☐ Check if this is community property (see instructions)	\$2,500.00	\$2,500.00
3.2 Make	e: Ford		Who has an interest in the property? Check one		claims or exemptions. Put ed claims on Schedule D:
Mode	el: <b>F-150</b>		☐ Debtor 1 only		nims Secured by Property.
Year	2008		Debtor 2 only	Current value of the	Current value of the
Appr	roximate mileage:	54,0000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Othe	er information:		☐ At least one of the debtors and another		
			Check if this is community property (see instructions)	\$5,000.00	\$5,000.00
			nd other recreational vehicles, other vehicles, a tercraft, fishing vessels, snowmobiles, motorcycle		
Examples  No  Yes  Add the pages y  Part 3: Des	s: Boats, trailers e dollar value of you have attach scribe Your Perso	the portion you ow ed for Part 2. Write	atercraft, fishing vessels, snowmobiles, motorcycle on for all of your entries from Part 2, including a that number here	e accessories	\$7,500.00
Examples  No  Yes  Add the pages y	s: Boats, trailers e dollar value of you have attach scribe Your Perso	the portion you ow ed for Part 2. Write	rn for all of your entries from Part 2, including a	e accessories	Current value of the portion you own? Do not deduct secured
No □ Yes  Add the pages y  Part 3: Des Do you ow  Househe Example	e dollar value of you have attach scribe Your Perso yn or have any I	the portion you ow ed for Part 2. Write nal and Household Ite egal or equitable in	en for all of your entries from Part 2, including a that number here	e accessories	Current value of the portion you own?
No □ Yes  Add the pages y  Part 3: Des Do you ow  Househe Example	e dollar value of you have attach scribe Your Perso yn or have any I	the portion you ow ed for Part 2. Write anal and Household Ite egal or equitable in	on for all of your entries from Part 2, including a that number here	e accessories	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples  No  Yes  Add the pages y  Part 3: Des  Do you ow  Househe Example  No  Yes.  Electron  Example	e dollar value of you have attach scribe Your Perso on or have any lold goods and es. Major appliar Describe	the portion you owed for Part 2. Write and Household Ite egal or equitable in furnishings aces, furniture, linens Misc. Furnishin	on for all of your entries from Part 2, including a that number here	any entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples  No ☐ Yes  Add the pages y  The pa	e dollar value of you have attach scribe Your Perso on or have any look goods and les: Major appliar Describe	the portion you owed for Part 2. Write and Household Ite egal or equitable in furnishings aces, furniture, linens Misc. Furnishin	en for all of your entries from Part 2, including a that number here	e accessories  any entries for  ters, scanners; music collections	Current value of the portion you own? Do not deduct secured claims or exemptions.  \$10,000.00
Examples  No  Yes  Add the pages y  Part 3: Des  Do you ow  Househe Example  No  Yes.  Electron  Example  No  Yes.  Collectil  Example	e dollar value of you have attach scribe Your Perso on or have any look goods and les: Major appliar Describe	the portion you owed for Part 2. Write and Household Ite egal or equitable in furnishings ances, furniture, linens Misc. Furnishing and radios; audio, vide phones, cameras, multiple figurines; paintings,	en for all of your entries from Part 2, including a that number here	e accessories  any entries for  ters, scanners; music collections	Current value of the portion you own? Do not deduct secured claims or exemptions.  \$10,000.00

Debtor 1 Debtor 2	John M Hughes Leona E Hughes	Case number (if known)	
	ent for sports and hobbies es: Sports, photographic, exercise, and musical instruments	other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No □ Yes.	Describe		
■ No	oles: Pistols, rifles, shotguns, ammunition	on, and related equipment	
11. Clothe	Describe  s bles: Everyday clothes, furs, leather coa	oto degigner weer chees geographics	
■ No	Describe	ats, designer wear, sinces, accessories	
□ No		v, engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
_ 100.	Jewelry		\$1,000.00
14. Any otl ■ No □ Yes.  15. Add t	Give specific information he dollar value of all of your entries	ou did not already list, including any health aids you did not list for pages you have attached	\$11,400.00
Do you ow	vn or have any legal or equitable inte	erest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	ples: Money you have in your wallet, in	your home, in a safe deposit box, and on hand when you file your peti	tion
•		ial accounts; certificates of deposit; shares in credit unions, brokerage ccounts with the same institution, list each.	houses, and other similar
		Institution name:	
	17.1.	Checking - Wells Fargo	\$650.00
	17.2.	Savings - UFCW	\$1,252.00

Official Form 106A/B Schedule A/B: Property page 3

	ebtor 1 ebtor 2	John M Hughes Leona E Hughes Case number (if known)	
	_Examp	, mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with brokerage firms, money market accounts	
	■ No □ Yes	Institution or issuer name:	
19.		ublicly traded stock and interests in incorporated and unincorporated businesses, including an intere- int venture	st in an LLC, partnership,
	■ No		
	☐ Yes.	Give specific information about them	
	Negoti Non-ne	nment and corporate bonds and other negotiable and non-negotiable instruments iable instruments include personal checks, cashiers' checks, promissory notes, and money orders. egotiable instruments are those you cannot transfer to someone by signing or delivering them.	
	■ No □ Yes.	Give specific information about them  Issuer name:	
	Examp ■ No	ment or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing	g plans
	⊔ Yes.	List each account separately.  Type of account:  Institution name:	
	Your s	ty deposits and prepayments hare of all unused deposits you have made so that you may continue service or use from a company ples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications compa	anies, or others
	_		
	_	ies (A contract for a periodic payment of money to you, either for life or for a number of years)	
	■ No □ Yes	Issuer name and description.	
	Interest 26 U.S.0	ts in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition pr C. $\S\S$ 530(b)(1), 529A(b), and 529(b)(1).	ogram.
	☐ Yes	Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c	):
25.	Trusts, ■ No	, equitable or future interests in property (other than anything listed in line 1), and rights or powers ex	ercisable for your benefit
	☐ Yes.	Give specific information about them	
		s, copyrights, trademarks, trade secrets, and other intellectual property poles: Internet domain names, websites, proceeds from royalties and licensing agreements	
	☐ Yes.	Give specific information about them	
		es, franchises, and other general intangibles  oles: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	ses
		Give specific information about them	
Mo	oney or	property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	_	funds owed to you	
	■ No □ Yes.	Give specific information about them, including whether you already filed the returns and the tax years	

	ebtor 1 ebtor 2	John M Hughes Leona E Hughes		Case number (if known)	
	Family Examp ■ No	• •	nony, spousal support, child support	, maintenance, divorce settlement, property	settlement
	_	Give specific information			
		mounts someone owes you les: Unpaid wages, disability in benefits; unpaid loans you	surance payments, disability benefit made to someone else	ts, sick pay, vacation pay, workers' comper	esation, Social Security
	_	Give specific information			
	_ 103.	Give specific information	2015 refund (est.)		\$500.00
31.	Interes Examp	s in insurance policies les: Health, disability, or life ins	surance; health savings account (HS	SA); credit, homeowner's, or renter's insuran	се
	☐ Yes.	Name the insurance company of Company	of each policy and list its value. y name:	Beneficiary:	Surrender or refund value:
32.	If you a		you from someone who has died ust, expect proceeds from a life insur	rance policy, or are currently entitled to rece	ive property because
		Give specific information			
	Examp  ■ No		er or not you have filed a lawsuit of sputes, insurance claims, or rights to		
	■ No	ontingent and unliquidated of Describe each claim	claims of every nature, including o	counterclaims of the debtor and rights to	set off claims
35.	Any fin	ancial assets you did not alre	eady list		
	■ No □ Yes.	Give specific information			
36		ne dollar value of all of your e rt 4. Write that number here.		entries for pages you have attached	\$2,402.00
Pa	rt 5: Des	cribe Any Business-Related Prop	perty You Own or Have an Interest In. Li	ist any real estate in Part 1.	
	Do you o  No. Go	·	interest in any business-related proper	rty?	
_	_	o to line 38.			
Pa		<b>cribe Any Farm- and Commercial</b> u own or have an interest in farmlar	I Fishing-Related Property You Own or nd, list it in Part 1.	Have an Interest In.	
46.	■ No.	Go to Part 7.	uitable interest in any farm- or cor	mmercial fishing-related property?	
	rt 7:	Go to line 47.  Describe All Property You Own	or Have an Interest in That You Did Not	t List Above	

Debto	• • • • • • • • • • • • • • • • • • • •		Case number (if known)	
	o you have other property of any kind you did not already list?  Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	t number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$230,000.00
56.	Part 2: Total vehicles, line 5	\$7,500.00		
57.	Part 3: Total personal and household items, line 15	\$11,400.00		
58.	Part 4: Total financial assets, line 36	\$2,402.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$21,302.00	Copy personal property to	stal <b>\$21,302.00</b>
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$251,302.00

Fill in this inform	mation to identify your	case:		
Debtor 1	John M Hughes			
	First Name	Middle Name	Last Name	
Debtor 2	Leona E Hughes			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number _				☐ Check if this is an
				amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exem	pt
---	----

	☐ You are claiming state and federal nonbar	kruptcy exemptions.	11 U.	S.C. § 522(b)(3)		
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exc	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	8 Andes Trail West Berlin, NJ 08091 Camden County	\$230,000.00		\$45,950.00	11 U.S.C. § 522(d)(1)	
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
	Misc. Furnishings Line from Schedule A/B: 6.1	\$10,000.00		\$10,000.00	11 U.S.C. § 522(d)(3)	
	Line Ironi Scriedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit		
	Collectibles Line from Schedule A/B: 8.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)	
	Line Holli Schedule Arb. 6.1			100% of fair market value, up to any applicable statutory limit		
	Jewelry Line from Schedule A/B: 12.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(4)	
	Line Holli Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit		
	Checking - Wells Fargo Line from Schedule A/B: 17.1	\$650.00		\$650.00	11 U.S.C. § 522(d)(5)	
	Line Ironi Scriedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit		

	otor 1 otor 2	John M Hughes Leona E Hughes			Case number (if known)	
		description of the property and line on dule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
		ings - UFCW from Schedule A/B: 17.2	\$1,252.00		\$1,252.00	11 U.S.C. § 522(d)(5)
	LINE	TOTAL SCHEDULE PAD. 17.2			100% of fair market value, up to any applicable statutory limit	
		5 refund (est.) from Schedule A/B: 30.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
	Line	from Scriedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	
3.	(Sub	ou claiming a homestead exemption ject to adjustment on 4/01/16 and every			iled on or after the date of adjustme	int.)
		Yes. Did you acquire the property cover	red by the exemption w	ithin 1	,215 days before you filed this case	?

Yes

Fill in this informa	ation to identify you	r case:				
Debtor 1	John M Hughes					
	First Name	Middle Name Las	t Name			
Debtor 2	Leona E Hughes		( N = = = =			
(Spouse if, filing)	First Name	Middle Name Las	t Name			
United States Bank	ruptcy Court for the:	DISTRICT OF NEW JERSEY				
Casa mumban						
Case number					☐ Check	if this is an
					_	ed filing
						Ü
Official Form	<u>106D</u>					
Schedule D	): Creditors	Who Have Claims Se	cured	by Property	1	12/15
				<u> </u>		
		two married people are filing together, bot number the entries, and attach it to this fo				
•	ive claims secured by	vour property?				
	,	is form to the court with your other sch	edules V	ou have nothing else t	n report on this form	
_		·	edules. I	ou have nothing else ti	o report on this form.	
■ Yes. Fill in a	Ill of the information b	pelow.				
Part 1: List All S	Secured Claims					
		ore than one secured claim, list the creditor se			Column B	Column C
		articular claim, list the other creditors in Part 2 or according to the creditor's name.	. As much	Amount of claim  Do not deduct the	Value of collateral that supports this	Unsecured portion
	anno in alphabotical orde	· ·		value of collateral.	claim	If any
2.1 Seterus		Describe the property that secures the cla		\$22,000.00	\$230,000.00	\$0.00
Creditor's Name		8 Andes Trail West Berlin, NJ 08	3091			
P.O. Box 20	ากร	Camden County				
Grand Rapi		As of the date you file, the claim is: Check	all that			
49501-2008		apply.  Contingent				
Number, Street, Ci	ity, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortg	age or secu	ıred		
Debtor 2 only		car loan)				
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic	s's lien)			
At least one of the		Judgment lien from a lawsuit				
☐ Check if this clain community debt		Other (including a right to offset)	st Mortg	age		
community dobt						
Date debt was incurre	ed 1999	Last 4 digits of account number	2274			
2.2 Wells Fargo	Dealer Svc	Describe the property that secures the cla	aim:	\$8,000.00	\$2,500.00	\$5,500.00
Creditor's Name		2007 Pontiac G6		Ψο,σσοίσσ	ΨΞ,000.00	
		2001 1 01111100 00				
		As of the date you file, the claim is: Check	all that			
P.O. Box 17		apply.	ali triat			
	80212-7900	Contingent				
Number, Street, Ci	ity, State & Zip Code	Unliquidated				
Who owes the debt	? Check one	Disputed  Nature of lien. Check all that apply.				
Debtor 1 only	OHOUR UNG.	An agreement you made (such as mortga	age or soon	ured		
_ ′		car loan)	age or secu	ii Gu		
■ Debtor 2 only ■ Debtor 1 and Debtor	or 2 only	Statutory lien (such as tax lien, mechanic	's lien)			
At least one of the	•	☐ Judgment lien from a lawsuit	, s IICII)			
☐ Check if this claim		•	chase N	Money Security		
community debt		— Saler (including a right to onset)				<del></del>
Date debt was incurr	ad	Last 4 digits of account number	9404			

Debtor 1 John M Hughes		C	case number (if know)		
First Name Middle N	ame Last Name				
Debtor 2 Leona E Hughes					
First Name Middle N	ame Last Name				
Wells Fargo Home Mortgage	Describe the property that secures the	e claim:	\$51,800.00	\$230,000.00	\$0.00
Creditor's Name	8 Andes Trail West Berlin, N.	J 08091			
	Camden County				
P.O. Box 10335 Des Moines, IA 50306	As of the date you file, the claim is: Chapply.  Contingent	heck all that			
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mo	ortgogo or good	rod		
Debtor 2 only	car loan)	origage or secui	leu		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Second Mo	rtgage		
Date debt was incurred 2005	Last 4 digits of account numbe	er <u>1998</u>			
Add the dollar value of your entries in Co	olumn A on this page. Write that number	r here:	\$81,800.	00	
If this is the last page of your form, add to Write that number here:	he dollar value totals from all pages.		\$81,800.	00	
	w a Daht That Van Alvander Lister				
	r a Debt That You Already Listed				
Use this page only if you have others to be to collect from you for a debt you owe to s creditor for any of the debts that you listed do not fill out or submit this page.	omeone else, list the creditor in Part 1,	and then list th	e collection agency here.	Similarly, if you have more	e than one
Name Address					
-NONE-	On	n which line	in Part 1 did you er	nter the creditor?	
	La	st 4 digits o	of account number		

	mation to identify your ca	se:				
Debtor 1						
Debior 1	John M Hughes First Name	Middle Name	Last Name			
Debtor 2	Leona E Hughes					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW JERSE	Y			
Case number						
(if known)						Check if this is an
					a	amended filing
Official Forn	n 106E/E					
		a Haya Hasaayra	d Claima			12/15
		o Have Unsecured art 1 for creditors with PRIORIT			AND DIODITY III	
D: Creditors Who H the Continuation Panumber (if known).	lave Claims Secured by Prope age to this page. If you have n	I Leases (Official Form 106G). I erty. If more space is needed, c no information to report in a Par	opy the Part yo	ou need, fill it out, number	the entries in the l	poxes on the left. Attach
	II of Your PRIORITY Unse					
	ors have priority unsecured cl	laims against you?				
	Part 2					
No. Go to P	art Z.					
☐ Yes.						
☐ Yes.  Part 2: List A	II of Your NONPRIORITY					
☐ Yes.  Part 2: List A						
Part 2: List A 3. Do any credito	II of Your NONPRIORITY		n your other sch	edules.		
Part 2: List A 3. Do any credito	II of Your NONPRIORITY	ed claims against you?	n your other sch	edules.		
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You hav ☐ Yes.  4. List all of your claim, list the co	Il of Your NONPRIORITY ors have nonpriority unsecure we nothing to report in this part.  r nonpriority unsecured claim reditor separately for each claim	ed claims against you?	ne creditor who	o holds each claim. If a crea m it is. Do not list claims alre	ady included in Par	t 1. If more than one
☐ Yes.  Part 2: List A  3. Do any creditc ☐ No. You hav ☐ Yes.  4. List all of your claim, list the ci creditor holds a	Il of Your NONPRIORITY ors have nonpriority unsecure we nothing to report in this part.  r nonpriority unsecured claim reditor separately for each claim	ed claims against you?  Submit this form to the court with  s in the alphabetical order of the properties of the propert	ne creditor who what type of clair re than three no	o holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil	ady included in Par	t 1. If more than one on Page of Part 2.
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You hav ☐ Yes.  4. List all of your claim, list the circeditor holds a  4.1 Associa Nonpriority	ors have nonpriority unsecured ve nothing to report in this part.  r nonpriority unsecured claim reditor separately for each claim a particular claim, list the other claim at the control of the control	s in the alphabetical order of the court with redictions in Part 3.If you have more Last 4 digits of ac	ne creditor who what type of clair re than three no	o holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil 8892	ady included in Par	t 1. If more than one on Page of Part 2.  Total claim
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You hav ☐ Yes.  4. List all of your claim, list the circeditor holds a  Associate Nonpriority P.O. Bo	ors have nonpriority unsecured ve nothing to report in this part.  remonpriority unsecured claim reditor separately for each claim a particular claim, list the other claim of the control	s in the alphabetical order of the court with redictions in Part 3.If you have more ast 4 digits of ac	ne creditor who what type of clair re than three no	o holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil	ady included in Par	t 1. If more than one on Page of Part 2.  Total claim
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You hav ☐ Yes.  4. List all of your claim, list the circeditor holds a  Associate Nonpriority P.O. Bouwestbo	ors have nonpriority unsecured ve nothing to report in this part.  r nonpriority unsecured claim reditor separately for each claim a particular claim, list the other claim at the control of the control	s in the alphabetical order of the court with redictions in Part 3.If you have more ast 4 digits of ac	ne creditor who what type of clair re than three no count number bt incurred?	o holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil 8892	ady included in Par	t 1. If more than one on Page of Part 2.  Total claim
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You hav ☐ Yes.  4. List all of your claim, list the claim.  4.1 Association Nonpriority P.O. Bounders Support	ors have nonpriority unsecured ve nothing to report in this part.  In nonpriority unsecured claim reditor separately for each claim a particular claim, list the other of the control of t	Submit this form to the court with s in the alphabetical order of the fin. For each claim listed, identify we creditors in Part 3.If you have more tast 4 digits of ac When was the detection.  As of the date you	ne creditor who what type of clair re than three no count number bt incurred?	o holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil  8892  Unknown	ady included in Par	t 1. If more than one on Page of Part 2.  Total claim
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You hav ☐ Yes.  4. List all of your claim, list the claim.  4.1 Association Nonpriority P.O. Bounders Support	ors have nonpriority unsecured ve nothing to report in this part.  If nonpriority unsecured claim reditor separately for each claim a particular claim, list the other of a particular separately for each claim a particular claim, list the other of a ted Credit y Creditor's Name by 5171 prough, MA 01581-5171 treet City State Zlp Code rred the debt? Check one.	s in the alphabetical order of the prediction of the court with some sine the alphabetical order of the predictions in Part 3.If you have more than the court with some sine predictions in Part 3.If you have more than the court when was the deletal court and the court with the court wi	ne creditor who what type of clair re than three no count number bt incurred?	o holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil  8892  Unknown	ady included in Par	t 1. If more than one on Page of Part 2.  Total claim
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You have the control of the cont	Il of Your NONPRIORITY or have nonpriority unsecured ve nothing to report in this part.  I nonpriority unsecured claim reditor separately for each claim a particular claim, list the other of the control of the contro	Submit this form to the court with s in the alphabetical order of the first the court with the c	ne creditor who what type of clair re than three no count number bt incurred?	o holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil  8892  Unknown	ady included in Par	t 1. If more than one on Page of Part 2.  Total claim
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You have a yes.  4. List all of your claim, list the concreditor holds a honopriority P.O. Bout westbout a who incu ☐ Debtor	Il of Your NONPRIORITY or have nonpriority unsecured ve nothing to report in this part.  I nonpriority unsecured claim reditor separately for each claim a particular claim, list the other of the control of the contro	Submit this form to the court with s in the alphabetical order of the fine the real phabetical order of the fine the fine the second order of the fine the f	ne creditor who what type of clair te than three not account number bt incurred?	b holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil  8892  Unknown  is: Check all that apply	ady included in Par	t 1. If more than one on Page of Part 2.  Total claim
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You have the control of the cont	ors have nonpriority unsecured ve nothing to report in this part.  In nonpriority unsecured claim reditor separately for each claim a particular claim, list the other of the control of t	Submit this form to the court with some in the alphabetical order of the first part 3. If you have more claim listed, identify we creditors in Part 3. If you have more claim listed, identify we creditors in Part 3. If you have more claim listed, identify we creditors in Part 3. If you have more claim listed, identify we creditors in Part 3. If you have more claim listed, identify as a first part of the date you continue to the continue of the court of the	ne creditor who what type of clair te than three not account number bt incurred?	b holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil  8892  Unknown  is: Check all that apply	ady included in Par	t 1. If more than one on Page of Part 2.  Total claim
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You have the control of the cont	ors have nonpriority unsecured claim reditor separately for each claim a particular claim, list the other of the country of th	Submit this form to the court with some the alphabetical order of the first part 3. If you have more considered as the court with some the alphabetical order of the first part 3. If you have more considered as the court with some the court with the court of the cou	ne creditor who what type of clair re than three nor ecount number bt incurred? u file, the claim	b holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil  8892  Unknown is: Check all that apply  ed claim:	eady included in Par	t 1. If more than one on Page of Part 2.  Total claim
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You have the control of the cont	ors have nonpriority unsecured ve nothing to report in this part.  If nonpriority unsecured claim reditor separately for each claim a particular claim, list the other of a particular separately for each claim a particular claim, list the other of a particular separately for each claim a particular claim, list the other of a particular claim.  If only 1 and Debtor 2 only 1 and	Submit this form to the court with some the alphabetical order of the first part 3. If you have more considered as the court with some the alphabetical order of the first part 3. If you have more considered as the court with some the court with the court of the cou	ne creditor who what type of clair re than three nor count number of incurred? u file, the claim  ORITY unsecure	b holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil  8892  Unknown  is: Check all that apply	eady included in Par	t 1. If more than one on Page of Part 2.  Total claim
☐ Yes.  Part 2: List A  3. Do any credito ☐ No. You have a yes.  4. List all of your claim, list the correditor holds a yes.  4.1 Associate Nonpriority P.O. Boom westboom with the correditor holds a yes boom westboom in the correct of the pebtor ☐ Debtor ☐ Debtor ☐ At leas ☐ Checker	ors have nonpriority unsecured ve nothing to report in this part.  In nonpriority unsecured claim reditor separately for each claim a particular claim, list the other of the control of t	Submit this form to the court with so in the alphabetical order of the first the court with so in the alphabetical order of the first the court with so in the alphabetical order of the first the court with so in the cou	ne creditor who what type of clair re than three nor count number bt incurred? u file, the claim  ORITY unsecure sing out of a sep aims	b holds each claim. If a cree m it is. Do not list claims alre inpriority unsecured claims fil  8892  Unknown is: Check all that apply  ed claim:	e that you did not	t 1. If more than one on Page of Part 2.  Total claim

Best Case Bankruptcy

	11 John M Hughes 12 Leona E Hughes		Case number (if know)	
4.2	Bank of America	Last 4 digits of account number	2412	\$18,268.00
	Nonpriority Creditor's Name P.O. Box 15713 Wilmington, DE 19886-5713	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	■ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.3	Capitol One Bank	Last 4 digits of account number	9868	\$365.44
	Nonpriority Creditor's Name P.O. Box 30287	When was the debt incurred?	2012	•
	Salt Lake City, UT 84130-0287  Number Street City State Zlp Code	As of the data you file the claim i	a. Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim i	<b>5.</b> Спеск ан тат арріу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	<u> </u>	Type of NONPRIORITY unsecured	I claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit card	• •	
4.4	Client Services	Last 4 digits of account number	4687	\$150.00
7.7	Nonpriority Creditor's Name	Last 4 digits of account number	4007	φ130.00
	3451 Harry S Truman Blvd Saint Charles, MO 63301-4047	When was the debt incurred?	2000	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:	
	$\square$ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit card	purchases	

	1 John M Hughes 2 Leona E Hughes		Case number (if know)	
4.5	Credit One Bank	Last 4 digits of account number	9423	\$340.00
	Nonpriority Creditor's Name P.O. Box 60500 City of Industry, CA 91716	When was the debt incurred?	2015	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.6	Delbert Services	Last 4 digits of account number	0624	\$395.37
	Nonpriority Creditor's Name P.O. Box 4730 Anaheim, CA 92803	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	■ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Loan		
4.7	Discover c/o Pressler & Pressler, LLP	Last 4 digits of account number	5038	\$10,597.00
	Nonpriority Creditor's Name 7 Entin Rd. Parsippany, NJ 07054	When was the debt incurred?	2010	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only			
	■ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	I claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit card	purchases	
		· · · ·		

	1 John M Hughes 2 Leona E Hughes	Case number (if know)	
4.8	Firestone Complete Auto Care Nonpriority Creditor's Name	Last 4 digits of account number	\$1,045.18
	P.O. Box 81410 Cleveland, OH 44181-0410	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
		☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.9	Midland Funding Nonpriority Creditor's Name	Last 4 digits of account number	\$1,427.49
	c/o Pressler & Pressler, LLP	When was the debt incurred?	
	7 Entin Rd.		
	Parsippany, NJ 07054  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	_	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.10	National Credit Adjusters	Last 4 digits of account number 6469	\$400.00
	Nonpriority Creditor's Name P.O. Box 3023	When was the debt incurred?	
	Hutchinson, KS 67504  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Payday Loan	

Debtor 2	Leona E	Hughes		Case r	number (if know)		
4.11	Spotloan		Last 4 digits of account number				\$400.00
ı	Nonpriority Cre P.O. Box 92		When was the debt incurred?	2015	;		
		City State Zlp Code	As of the date you file, the claim i	s: Check	all that apply		
\	Who incurred	the debt? Check one.	☐ Contingent				
	Debtor 1 on	ly	☐ Unliquidated				
l	Debtor 2 on	ly	☐ Disputed				
I	Debtor 1 an	d Debtor 2 only	Type of NONPRIORITY unsecured	l claim:			
I	At least one	of the debtors and another	☐ Student loans				
		is claim is for a community debt	☐ Obligations arising out of a sepa report as priority claims	ration ag	reement or divorce t	hat you did not	
1	No		Debts to pension or profit-sharin	g plans,	and other similar del	ots	
į	☐ Yes		■ Other. Specify Payday Loa	an			
Part 3:	List Other	s to Be Notified About a Debt	That You Already Listed				
Name and Credit I		Lir <b>188</b>	which entry in Part 1 or Part 2 did you are 4.8 of (Check one):	<b>]</b> Part 1:	Creditors with Priori	ty Unsecured Claims riority Unsecured Claims	
			st 4 digits of account number				
Part 4:		mounts for Each Type of Unso certain types of unsecured claims	ecured Claim  This information is for statistical re	oorting r	ourposes only, 28 U	LS.C. §159. Add the amo	ounts for each type
	cured claim.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				<b>3</b>	· · · · · · · · · · · · · · · · · · ·
	6a.	Domestic support obligations		6a.	Total claim	0.00	
Total clai		Domestic support obligations		ua.	Φ	0.00	
from Pa			•	6b.	\$	0.00	
	6c.	Claims for death or personal inju		6c.	\$	0.00	
	6d.	Other. Add all other priority unsect	ured claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total. Add lines 6a through 6d.		6e.	\$	0.00	
					Total Claim		
	6f.	Student loans		6f.	\$	0.00	
Tatal alai							
Total clai	<b>rt 2</b> 6g.	did not report as priority claims	aration agreement or divorce that you	6g.	\$	0.00	
	<b>rt 2</b> 6g. 6h.	did not report as priority claims Debts to pension or profit-sharing	ng plans, and other similar debts	6g. 6h.	\$	395.37	
	<b>rt 2</b> 6g.	did not report as priority claims Debts to pension or profit-sharing	-	6g. 6h.			

Fill in this inform	mation to identify your	case:		
Debtor 1	John M Hughes			
	First Name	Middle Name	Last Name	
Debtor 2	Leona E Hughes			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number				
(if known)				☐ Check if this is an
				amended filing

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					_
	Name				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3					
	Name				<del></del>
	Number	Street			_
	-0"		0: :	710.0	_
2.4	City		State	ZIP Code	
2.4	Name				<u> </u>
	INAITIE				
	Number	Street			<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Fill in this in	formation to identify your	case:			
Debtor 1	John M Hughes				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Leona E Hughes First Name	Middle Name	Last Name		
-					
United States	s Bankruptcy Court for the:	DISTRICT OF NEW J	ERSEY		
Case numbe	r				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
	ile H: Your Code	ahtors			42/45
Scriedu	ile II. Tour Cour				12/15
our name a	I number the entries in the nd case number (if known). ou have any codebtors? (If v	. Answer every questic	on.		of any Additional Pages, write
1. DO yo	a nave any codebiors: (ii )	rod are filling a joint case	s, do not list either spouse	as a codebior.	
■ No					
☐ Yes					
	n the last 8 years, have you California, Idaho, Louisiana,				states and territories include
	o to line 3. Did your spouse, former spou	ise, or legal equivalent l	ive with you at the time?		
in line 2 Form 10	again as a codebtor only if	f that person is a guara	antor or cosigner. Make	sure you have listed the 06G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Officia chedule E/F, or Schedule G to
	olumn 1: Your codebtor me, Number, Street, City, State and ZII	P Code		Column 2: The crediction Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
Na	me			☐ Schedule E/F, line	 e
				☐ Schedule G, line	
Nu	mber Street			_	
Cit	у	State	ZIP Code		
3.2				☐ Schedule D, line	
Na	me			_ ☐ Schedule E/F, line	 e
				☐ Schedule G, line	
Nu	mber Street			_	
Cit		State	ZIP Code		

Eill	in this information to identify you	r casa:						
	otor 1 John M H							
	otor 2 Leona E F	lughes						
Uni	ted States Bankruptcy Court for	the: DISTRICT OF NEW	IERSEY					
	se number 		-		☐ A sup	mended filing oplement show	ing postpetition ch	napter
0	fficial Form 106l				MM /	DD/ YYYY		
S	chedule I: Your In	come						12/15
spo atta	plying correct information. If y use. If you are separated and y ch a separate sheet to this for Describe Employme	our spouse is not filing w n. On the top of any additi	ith you, do not inclu	de informa	tion about yo	ur spouse. If	more space is ne	eded,
1.	Fill in your employment information.		Debtor 1		De	btor 2 or non-	-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed			Employed		
	information about additional employers.	<b>,</b> .,	☐ Not employed			Not employed		
		Occupation	Produce Mgr.		PC	T		
	Include part-time, seasonal, or self-employed work.	Employer's name	Acme Markets		Vir	rtua Memoria	al Hosp.	
	Occupation may include stude or homemaker, if it applies.	nt Employer's address	Ellis Ave. Haddonfield, N.	J 08033		adison Ave. . Holly, NJ		
		How long employed t	here? 43 yrs			7 yrs		
Par	t 2: Give Details About M	Ionthly Income						
	mate monthly income as of the use unless you are separated.	e date you file this form. If	you have nothing to r	eport for an	y line, write \$0	in the space.	Include your non-	filing
	u or your non-filing spouse have e space, attach a separate sheet		ombine the information	n for all em	ployers for that	t person on the	e lines below. If yo	ou need
					For Debtor		ebtor 2 or iling spouse	
2.	List monthly gross wages, sa deductions). If not paid month			2.	3,900	0.00 \$	2,600.00	
3.	Estimate and list monthly ov	ertime pay.		3. +	\$ 0	0.00 +\$	0.00	

3,900.00

2,600.00

Calculate gross Income. Add line 2 + line 3.

Case number (if known)

						For I	Debtor 1		Debtor 2 or -filing spouse	
	Copy	line 4 here			4.	\$	3,900.00	\$	2,600.00	
5.	List a	all payroll deductions:								
	5a.	Tax. Medicare, and S	ocial Security deductions		5a.	\$	914.33	\$	741.00	
	5b.		ions for retirement plans		5b.	\$	0.00	\$_	0.00	
	5c.	•	ons for retirement plans		5c.	\$	0.00	\$_	0.00	
	5d.	=	s of retirement fund loans		5d.	\$	0.00	\$	0.00	
	5e.	Insurance			5e.	\$	0.00	\$	0.00	
	5f.	Domestic support of	oligations		5f.	\$	0.00	\$_	0.00	
	5g.	Union dues	nigations .		5g.	\$	0.00	\$_	0.00	
	5h.	Other deductions. Sp	pecify:		5h.+	\$-		+ \$_	0.00	
6.		·	. Add lines 5a+5b+5c+5d+5e+5f+	 5a+5h.	6.	\$ \$	914.33	* *	741.00	
7.		, ,	re-home pay. Subtract line 6 from	9	7.	\$ 	2,985.67	\$ 	1,859.00	
8.		All other income regul Net income from ren profession, or farm Attach a statement for	• •	a <b>business</b> , ng gross	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividend	ls		8b.	\$	0.00	\$	0.00	
	8d. 8e. 8f.	regularly receive Include alimony, spou settlement, and prope Unemployment comp Social Security Other government as Include cash assistant that you receive, such Nutrition Assistance P Specify:	seistance that you regularly receive and the value (if known) of any ras food stamps (benefits under the rogram) or housing subsidies.	ve	8c. 8d. 8e.	\$ \$ \$	0.00 0.00 0.00	\$ \$ \$	0.00 0.00 0.00	
	8g.	Pension or retiremer			8g.	\$	0.00	\$	0.00	
	8h.	Other monthly incom	ie. Specify:		8h.+	\$	0.00	+ \$	0.00	
9.	Add	all other income. Add	lines 8a+8b+8c+8d+8e+8f+8g+8h.		9.	\$	0.00	\$	0.00	
10.	Calc	ulate monthly income.	Add line 7 + line 9.	10	D.   \$	2	,985.67 + \$	1,8	359.00 = \$	1,844.67
	Add t	he entries in line 10 for	Debtor 1 and Debtor 2 or non-filing	spouse.	-		·     -			
11.	State Include other	e all other regular cont de contributions from an friends or relatives. of include any amounts	ributions to the expenses that you unmarried partner, members of you already included in lines 2-10 or ar	bu list in Schedule Sour household, your d	lepen					0.00
12.		that amount on the Su	column of line 10 to the amount mmary of Schedules and Statistica							1,844.67
									Combine	
13.	Do yo	ou expect an increase	or decrease within the year after	you file this form?					monthly	income
		Yes. Explain:								
	-	-								

Fill	in this information to identify your case:				
Deb	otor 1 John M Hughes		Che	eck if this is:	
	Leona E Hughes puse, if filing)			An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	red States Bankruptcy Court for the: DISTRICT OF NEW JERSEY			MM / DD / YYYY	
Cas	e number				
(If k	nown)				
0	fficial Form 106J				
	chedule J: Your Expenses				12/15
Be	as complete and accurate as possible. If two married people ar ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
Par	t 1: Describe Your Household Is this a joint case?				
	□ No. Go to line 2.				
	■ Yes. Does Debtor 2 live in a separate household?				
	<ul><li>■ No</li><li>☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses</li></ul>	s for Separate House	ehold of De	ebtor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 Yes. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes ☐ No
					☐ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include ■ No				☐ Yes
Э.	expenses of people other than yourself and your dependents?				
	t 2: Estimate Your Ongoing Monthly Expenses				
exp	imate your expenses as of your bankruptcy filing date unless your some as of a date after the bankruptcy is filed. If this is a suppolicable date.				
	lude expenses paid for with non-cash government assistance invalue of such assistance and have included it on Schedule I: )				
	ficial Form 106l.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	e 4.	\$	0.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	600.00
	4b. Property, homeowner's, or renter's insurance		4b.	· -	275.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	·	200.00
5	<ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as hor</li> </ul>	me equity loops	4d. 5.		0.00 240.00
5.	Additional mortgage payments for your residence, such as not	me equity loans	Э.	Ψ	<b>240.00</b>

ebtor 1 ebtor 2	John M Hughes Leona E Hughes	Case num	ber (if known)	
JD101 Z	Leona L Hughes	Odoc Hulli		
Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	400.00
6b.	Water, sewer, garbage collection	6b.	\$	100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	179.00
6d.	Other. Specify:	6d.	\$	0.00
Foo	d and housekeeping supplies	7.	\$	500.00
Chil	dcare and children's education costs	8.	\$	0.00
	hing, laundry, and dry cleaning	9.	\$	100.00
	onal care products and services	10.	\$	50.00
	ical and dental expenses	11.	\$	50.00
	sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	500.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00
	ritable contributions and religious donations	14.	\$	25.00
	rance.		· <del></del>	
	ot include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	142.00
15d.	Other insurance. Specify:	15d.	\$	0.00
. Taxe	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	allment or lease payments:		Ψ	0.00
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2		\$	0.00
	Other. Specify:		\$	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report a		<u> </u>	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe	cify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Scl			
	Mortgages on other property	20a.	·	0.00
	Real estate taxes	20b.	· : ———	0.00
	Property, homeowner's, or renter's insurance	20c.	· <del></del>	0.00
	Maintenance, repair, and upkeep expenses	20d.	· ·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
Oth	er: Specify:	21.	+\$	0.00
	ulate your monthly expenses			
	Add lines 4 through 21.		\$	3,561.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,561.00
	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	4,844.67
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,561.00
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	1,283.67
For e	rou expect an increase or decrease in your expenses within the year after y xample, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?	ou file this		r decrease because of a

Fill in this infor	mation to identify your	case:		
Debtor 1	John M Hughes			
	First Name	Middle Name	Last Name	
Debtor 2	Leona E Hughes First Name	ACT III AT	N	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEE	RSEY	
Case number				
(if known)				☐ Check if this is an
				amended filing
You must file thi	is form whenever you f	le bankruptcy schedules n connection with a bank		mation. a false statement, concealing property, or o to \$250,000, or imprisonment for up to 20
Sig	n Below			
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankrupto	y forms?
■ No				
☐ Yes.	Name of person			ruptcy Petition Preparer's Notice, Declaration, e (Official Form 119).
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed with th	is declaration and
X /s/ Joh	nn M Hughes		X /s/ Leona E Hughes	5
	M Hughes		Leona E Hughes	
Signatu	ire of Debtor 1		Signature of Debtor 2	
Date ,	January 20, 2016		Date January 20, 2	2016

Fill in this	s information to identify you	ur case:			
Debtor 1	John M Hughes				
Debtor 2	First Name <b>Leona E Hughe</b>	Middle Name	Last Name		
(Spouse if, fil		Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the	: DISTRICT OF NEW JER	SEY		
Case num	nber				Check if this is an mended filing
Staten Be as com	nplete and accurate as poss	Affairs for Individual sible. If two married people and attach a separate sheet to	are filing together, both are	e equally responsible for sup	
	f known). Answer every que		this form. On the top of all	y additional pages, write yo	ar name and case
Part 1:	Give Details About Your M	arital Status and Where You	Lived Before		
1. What	t is your current marital stat	tus?			
_	Married Not married				
2. Durin	ng the last 3 years, have you	ı lived anywhere other than	where you live now?		
_	No Yes. List all of the places you	lived in the last 3 years. Do n	ot include where you live no	N.	
Debt	tor 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
		ever live with a spouse or legalifornia, Idaho, Louisiana, Ne			
_	No Yes. Make sure you fill out <i>So</i>	chedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explain the Sources of Yo	ur Income			
Fill in	the total amount of income y	employment or from operating ou received from all jobs and all have income that you receive	all businesses, including par	t-time activities.	ndar years?
_	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	calendar year: 1 to December 31, 2015 )	■ Wages, commissions, bonuses, tips	\$43,315.00	☐ Wages, commissions, bonuses, tips	\$0.00
		☐ Operating a business		☐ Operating a business	

Debtor 1	John M Hughes		
Debtor 2	Leona E Hughes	Case number (if known)	

	Dalidand		D-1:1 0	
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	■ Wages, commissions, bonuses, tips	\$52,063.76	■ Wages, commissions, bonuses, tips	\$33,095.92
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2014)	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$31,600.00
	☐ Operating a business		☐ Operating a business	
2014: Husband Acme Markets	■ Wages, commissions, bonuses, tips	\$51,300.00	☐ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
<ol> <li>Did you receive any other incom Include income regardless of whet unemployment, and other public be</li> </ol>	her that income is taxable. Ex	amples of other income are a	alimony; child support; Social S	

gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income Describe below	Gross income (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)

#### Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

_							
?	Ara aithar	Dehtor 1'e	or Debtor 2'	e dahte	nrimarily	CONSUMAL	dahte?

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an ☐ No. individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more?

□ No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

#### Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

**Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ... paid still owe

	otor 1 John M Hughes totor 2 Leona E Hughes		Case number	(if known)						
	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.									
	■ No									
	☐ Yes. List all payments to an insider									
	Insider's Name and Address	Dates of payment	Total amount Amour paid stil	t you I owe	Reason for	this payment				
	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos  No		ments or transfer any prope	rty on a	ccount of a d	ebt that benefited an				
	☐ Yes. List all payments to an insider									
	Insider's Name and Address	Dates of payment	Total amount Amour paid stil	nt you I owe	Reason for Include cred	this payment itor's name				
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures								
	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.									
	Yes. Fill in the details.									
	Case title Case number	Nature of the case	Court or agency		Status of th	e case				
	Discover Bank v John & Leona Hughes, DC-015815-13	Civil Action	Superior Court Camder Special Civil	ı Co.	☐ Pending ☐ On appe	al				
					Judgment					
	Midland Funding LLC v John Hughes, DJ-187644-14	Civil Action	Superior Court Camder County - Law Div	1	☐ Pending ☐ On appe ☐ Conclud	ed				
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No Yes. Fill in the information below.		erty repossessed, foreclosed	l, garnis						
	Creditor Name and Address	Describe the Property		Date		Value of the				
		Explain what happened	I			property				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed  No Yes. Fill in the details.		luding a bank or financial in	stitutior	n, set off any	amounts from your				
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount				
				taken						

	otor 2 Leona E Hughes		Case numbe	r (if known)	
	Within 1 year before you filed for bankricourt-appointed receiver, a custodian, o  ■ No □ Yes		as any of your property in the possession of an er official?	assignee for the ben	efit of creditors, a
Par	t 5: List Certain Gifts and Contributio	ns			
13.	Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$6		did you give any gifts with a total value of more  Describe the gifts	than \$600 per person  Dates you gave	? Value
	Person to Whom You Gave the Gift and Address:	d		the gifts	
14.	Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift or Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	contribut total	did you give any gifts or contributions with a to ion.  Describe what you contributed	tal value of more than  Dates you  contributed	\$600 to any charity  Value
Par	t 6: List Certain Losses				
	Within 1 year before you filed for bankridisaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred	<b>Descri</b> Include	be any insurance coverage for the loss the amount that insurance has paid. List g insurance claims on line 33 of Schedule A/B:	ything because of the Date of your loss	tt, fire, other  Value of property lost
Par	t 7: List Certain Payments or Transfer	rs			
16.	consulted about seeking bankruptcy or	preparii	id you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services requir		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Within 1 year before you filed for bankripromised to help you deal with your cred Do not include any payment or transfer that No  Yes. Fill in the details.	editors o		or transfer any prope	rty to anyone who
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and property transfer		payme	be any property or ents received or debts a exchange	Date transfer was made			
	Person's relationship to you				3.				
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.								
	Name of trust	Description and	value of the prop	erty trans	ferred	Date Transfer was			
						made			
Pai	rt 8: List of Certain Financial Accounts, Ins	truments, Safe Depos	it Boxes, and Sto	rage Unit	S				
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred?	, were any financial a	ccounts or instru	ments he	ld in your name, or for y	our benefit, closed,			
	Include checking, savings, money market, o houses, pension funds, cooperatives, assoc No Yes. Fill in the details.				t; shares in banks, cred	it unions, brokerage			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number			Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No								
	Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)				Do you still have it?			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)			he contents	Do you still have it?			
Pai	rt 9: Identify Property You Hold or Control f	or Someone Else							
23.	Do you hold or control any property that son for someone.	neone else owns? Inc	lude any property	you borr	owed from, are storing	for, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)			he property	Value			
Pai	rt 10: Give Details About Environmental Info	rmation							
For	the purpose of Part 10, the following definition	ons apply:							

■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

John M Hughes Debtor 1 Debtor 2 Leona E Hughes

Case number (if known)

		c substances, wastes, or material into t ulations controlling the cleanup of thes			ndwa	ter, or other medium, including s	tatutes or
		means any location, facility, or propert	•	-	l law	, whether you now own, operate,	or utilize it or used
	Haz	rardous material means anything an envariant material, pollutant, contaminant	viron	mental law defines as a hazardou	ıs wa	aste, hazardous substance, toxic	substance,
Rep	ort a	II notices, releases, and proceedings th	nat yo	ou know about, regardless of who	en the	ey occurred.	
24.	Has	any governmental unit notified you tha	at you	ı may be liable or potentially liab	le un	der or in violation of an environm	ental law?
		No					
		Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of	f any	release of hazardous material?			
		No					
		Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice
26.	Hav	e you been a party in any judicial or ad	minis	strative proceeding under any en	viron	mental law? Include settlements	and orders.
		No					
		Yes. Fill in the details.					
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Pai	t 11:	Give Details About Your Business or	Con	nections to Any Business			
27.	Witl	hin 4 years before you filed for bankrup	tcv. o	did you own a business or have a	any o	f the following connections to an	y business?
		☐ A sole proprietor or self-employed	-	•	-	<u> </u>	,
		☐ A member of a limited liability com					
		☐ A partner in a partnership		( ),		,	
		☐ An officer, director, or managing ex	veci if	ive of a cornoration			
				•			
		☐ An owner of at least 5% of the voting			11		
	_	No. None of the above applies. Go to					
		Yes. Check all that apply above and fil					
	Add	siness Name dress mber, Street, City, State and ZIP Code)		scribe the nature of the business me of accountant or bookkeeper		Employer Identification numbe Do not include Social Security	
				·		Dates business existed	
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, o	did you give a financial statemen	t to a	nyone about your business? Incl	ude all financial
		No					
		Voc. Fill in the details below					

Part 12: Sign Below

Name **Address** 

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy

**Date Issued** 

(Number, Street, City, State and ZIP Code)

Debtor Debtor			Case number (if kno	own)
with a b	and correct. I understand that making a false s ankruptcy case can result in fines up to \$250,0 C. §§ 152, 1341, 1519, and 3571.			y or property by fraud in connection
/s/ Jol	nn M Hughes	/s/ Le	ona E Hughes	
John I	M Hughes	Leona	E Hughes	
Signat	ure of Debtor 1	Signat	ure of Debtor 2	
Date	January 20, 2016	Date	January 20, 2016	_
Did you	attach additional pages to Your Statement of I	Financial	Affairs for Individuals Filing for Bankrupt	cy (Official Form 107)?
■ No				
☐ Yes				
Did you	pay or agree to pay someone who is not an att	torney to	nelp you fill out bankruptcy forms?	
■ No				
☐ Yes.	Name of Person Attach the Bankruptcy P	etition Pre	parer's Notice, Declaration, and Signature (	Official Form 119).

Fill in this inform	nation to identify your case:
Debtor 1	John M Hughes
Debtor 2 (Spouse, if filing)	Leona E Hughes
United States B	sankruptcy Court for the: District of New Jersey
Case number (if known)	

Check	as directed in lines 17 and 21:
	ording to the calculations required by this ement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

### Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colu Debt	mn A t <b>or 1</b>	Debt	mn B or 2 or filing spouse
<ol><li>Your gross wages, salary, tips, bonuses, overtin all payroll deductions).</li></ol>	ne, and c	ommissi	ons (before	\$	4,205.73	\$	2,682.71
<ol> <li>Alimony and maintenance payments. Do not inclu Column B is filled in.</li> </ol>	ide paym	ents from	a spouse if	\$	0.00	\$	0.00
<ol> <li>All amounts from any source which are regularly of you or your dependents, including child supp from an unmarried partner, members of your housel and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3.</li> <li>Net income from operating a business,</li> </ol>	ort. Inclu nold, you a spouse	ide regula r depende only if Co	r contributions ents, parents,	\$	0.00	\$	0.00
profession, or farm	© C	0.00					
Gross receipts (before all deductions)	Ψ _ -¢ -	0.00					
Ordinary and necessary operating expenses	-Ψ_		Copy here ->	Ф	0.00	\$	0.00
Net monthly income from a business, profession, or			Copy liefe ->	Ψ	0.00	Ψ	0.00
6. Net income from rental and other real property	Debto						
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00					
Net monthly income from rental or other real proper	ь, ф	0.00	Copy here ->	\$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

				Column A Debtor 1		Column B Debtor 2 o non-filing		
7. [	Interest, dividends, and royalties			\$	0.00	\$	0.00	
8. 1	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received under the Social Security Act. Instead, list it here:							
	For you \$	0.0	_					
	For your spouse \$	0.0						
ŀ	Pension or retirement income. Do not include any amount reconnection under the Social Security Act.			\$	0.00	\$	0.00	
 	Income from all other sources not listed above. Specify the s Do not include any benefits received under the Social Security A received as a victim of a war crime, a crime against humanity, or domestic terrorism. If necessary, list other sources on a separational below.	Act or payment r international	s or					
			_	\$	0.00	\$	0.00	
			_	\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	. \$	0.00	\$	0.00	
	Calculate your total average monthly income. Add lines 2 throeach column. Then add the total for Column A to the total for Co		\$	4,205.73	+ \$ _	2,682.71	= \$	6,888.44
		'						tal average
Part 2	Determine How to Measure Your Deductions from Inc.	come						The state of the s
12. (	Copy your total average monthly income from line 11.						\$	6,888.44
13. (	Calculate the marital adjustment. Check one:							
	You are not married. Fill in 0 below.							
ļ	You are married and your spouse is filing with you. Fill in 0	below.						
ļ	☐ You are married and your spouse is not filing with you.							
	Fill in the amount of the income listed in line 11, Column B, dependents, such as payment of the spouse's tax liability o							
	Below, specify the basis for excluding this income and the a adjustments on a separate page.	amount of inco	ome d	evoted to eac	h purpos	e. If necessar	y, list add	itional
	If this adjustment does not apply, enter 0 below.		•					
			» —					
			Ψ— <b>+</b> \$					
	_		-Ψ_					
	Total		\$	0.0	<u> </u>	opy here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12.						\$	6,888.44
15.	Calculate your current monthly income for the year. Follow	these steps:						6 000 44
	15a. Copy line 14 here=>						\$	6,888.44
	Multiply line 15a by 12 (the number of months in a year).						X	12
	15b. The result is your current monthly income for the year for	r this part of th	e forn	n			\$	82,661.28

Debte Debte			n M Hughe ona E Hugh			Case number ( <i>if known</i> )		
16	Cal	culat	e the median	family income that applies to	you. Follow these s	eps:		
	16a	. Fill i	n the state in	which you live.	NJ			
	16b	. Fill i	n the number	of people in your household.	2			
17		To f	ind a list of ap	family income for your state and policable median income amoun is form. This list may also be avapare?	ts, go online using th		\$_	73,099.00
	17a	. [				of this form, check box 1, <i>Disposable</i> for of Your Disposable Income (Official		
Par	17b	Ī	1325(b)(3 copy your		culation of Your Dis ie 14 above.	m, check box 2, <i>Disposable income is</i> posable Income (Official Form 122C		
18.	Cop	у уо	ur total avera	ige monthly income from line	11 .		\$	6,888.44
19.	spo	tend t use's	hat calculatin income, copy	<b>ljustment if it applies.</b> If you ar g the commitment period under the amount from line 13. stment does not apply, fill in 0 o	e married, your spou 11 U.S.C. § 1325(b)	se is not filing with you, and you 4) allows you to deduct part of your	-\$	0.00
	19b	. Sub	tract line 19a	a from line 18.			\$	6,888.44
20.			-	nt monthly income for the year	•		\$_	6,888.44
				e number of months in a year).				x 12
	20b	. The	result is your	current monthly income for the	year for this part of th	ne form	\$_	82,661.28
	20c	. Сор	y the median	family income for your state and	d size of household for	rom line 16c	\$_	73,099.00
	21.	Hov	v do the lines	s compare?				
				ess than line 20c. Unless otherwears. Go to Part 4.	ise ordered by the c	ourt, on the top of page 1 of this form, o	check box 3,	The commitment
				nore than or equal to line 20c. U period is 5 years. Go to Part 4.	nless otherwise orde	ered by the court, on the top of page 1 of	of this form,	check box 4, The
Par			<b>gn Below</b> g here, under	penalty of perjury I declare that	the information on the	nis statement and in any attachments is	s true and co	orrect.

#### If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

X /s/ Leona E Hughes

Leona E Hughes

Signature of Debtor 2

Date January 20, 2016

MM / DD / YYYY

X /s/ John M Hughes

John M Hughes

Signature of Debtor 1

Date January 20, 2016 MM / DD / YYYY

Fill in	this information to identify your case:		
Debto	r 1	_	
Debto (Spou	r 2 <u>Leona E Hughes</u> se, if filing)	_	
United	States Bankruptcy Court for the: District of New Jersey	_	
Case (if kno	number wn)	☐ Check if this is	an amended filing
	<u>ll Form 122C-2</u> lpter 13 Calculation of Your Disposable	Income	12/15
	out this form, you will need your completed copy of <i>Chapter 13 State</i> hitment Period (Official Form 122C-1).	ement of Your Current Monthly income a	and Calculation of
space	complete and accurate as possible. If two married people are filing to is needed, attach a separate sheet to this form, Include the line number and pages, write your name and case number (if known).		
Part 1	: Calculate Your Deductions from Your Income		
Dec exp 122	e Internal Revenue Service (IRS) issues National and Local Standards questions in lines 6-15. To find the IRS standards, go online using tormation may also be available at the bankruptcy clerk's office.  duct the expense amounts set out in lines 6-15 regardless of your actual elenses if they are higher than the standards. Do not include any operating 2C-1, and do not deduct any amounts that you subtracted from your spour expenses differ from month to month, enter the average expense.	he link specified in the separate instruct expense. In later parts of the form, you will expenses that you subtracted from income	tions for this form. This use some of your actual
Not	e: Line numbers 1-4 are not used in this form. These numbers apply to in	formation required by a similar form used in	n chapter 7 cases.
5.	The number of people used in determining your deductions from in	ncome	
	Fill in the number of people who could be claimed as exemptions on you plus the number of any additional dependents whom you support. This is the number of people in your household.		2
Nat	ional Standards You must use the IRS National Standards to a	nswer the questions in lines 6-7.	
6.	<b>Food, clothing, and other items:</b> Using the number of people you enter Standards, fill in the dollar amount for food, clothing, and other items.	ered in line 5 and the IRS National	\$1,092.00
7.	Out-of-pocket health care allowance: Using the number of people you the dollar amount for out-of-pocket health care. The number of people is people who are 65 or olderbecause older people have a higher IRS all higher than this IRS amount, you may deduct the additional amount on	s split into two categoriespeople who are owance for health car costs. If your actual of	under 65 and

Pec	ple who are under 65 years of age	
	7a. Out-of-pocket health care allowance per person	\$60
	7b. Number of people who are under 65	X2
	7c. <b>Subtotal.</b> Multiply line 7a by line 7b.	\$120.00 Copy here=> \$120.00
Pec	ple who are 65 years of age or older	
	7d. Out-of-pocket health care allowance per person	\$ <b>144</b> _
	7e. Number of people who are 65 or older	X <b>0</b> _
	7f. Subtotal. Multiply line 7d by line 7e.	\$ 0.00 Copy here=> \$ 0.00
	7g. <b>Total.</b> Add line 7c and line 7f	\$\$ Copy total here=> \$120.00
Loc	al Standards You must use the IRS Local Standards	to answer the questions in lines 8-15.
	ed on information from the IRS, the U.S. Trustee Prokruptcy purposes into two parts:	ogram has divided the IRS Local Standard for housing for
	Housing and utilities - Insurance and operating expe	nses
	Housing and utilities - Mortgage or rent expenses	
	arate instructions for this form. This chart may also	penses: Using the number of people you entered in line 5,
9.	Housing and utilities - Mortgage or rent expenses:	
	9a. Using the number of people you entered in line 5, listed for your county for mortgage or rent expense	A 1 663 00
	9b. Total average monthly payment for all mortgages	and other debts secured by your home.
	To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.	
	Name of the creditor	Average monthly payment
	-NONE-	<u> </u>
	9b. Total average monthly payme	nt \$Copy here=> -\$Repeat this amount on line 33a.
	9c. Net mortgage or rent expense.	
	Subtract line 9b (total average monthly payment) or rent expense). If this number is less than \$0, er	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
10.	If you claim that the U.S. Trustee Program's division the calculation of your monthly expenses, fill in any add	of the IRS Local Standard for housing is incorrect and affects ditional amount you claim.  \$ 0.00
	Evoloin why:	

Debtor 1 Debtor 2		M Hughes a E Hughes		Case number (if kn	own)	
11.	Local tra	ansportation expenses: Check the number of vehic	cles for which you claim	an ownership	or operating e	expense.
	□ 0. Go	to line 14.				
	☐ 1. Go	to line 12.				
	■ 2 or r	nore. Go to line 12.				
12.		operation expense: Using the IRS Local Standards g expenses, fill in the Operating Costs that apply for				\$ 598.00
13.	You may	<b>ownership or lease expense:</b> Using the IRS Local v not claim the expense if you do not make any loan an two vehicles.				
Vel	hicle 1	Describe Vehicle 1:				
13a.	Ownersh	ip or leasing costs using IRS Local Standard		\$	0.00	
13b.	Average	monthly payment for all debts secured by Vehicle 1.				
	J	nclude costs for leased vehicles.	-			
	are control bankrupt	late the average monthly payment here and on line ractually due to each secured creditor in the 60 montey. Then divide by 60.  me of each creditor for Vehicle 1	ths after you file for  Average monthly	at		
	-N/	ONE-	payment \$			
	-140	Total Average Monthly Payment	\$ 0.00	Copy here => -\$	0.0	Repeat this amount on line 33b.
13c.		icle 1 ownership or lease expense line 13b from line 13a. if this number is less than \$0	), enter \$0	 \$	0.00	Copy net //ehicle 1 expense here => \$0.00
Vel	hicle 2	Describe Vehicle 2:				
13d.	Ownersh	nip or leasing costs using IRS Local Standard		\$	0.00	
13e.	Average leased v	monthly payment for all debts secured by Vehicle 2 ehicles.	. Do not include costs for	or		
	Nar	me of each creditor for Vehicle 2	Average monthly payment			
	-NO	ONE-	\$			
		Total Average Monthly Payment	\$ 0.00	Copy here	0.00	Repeat this amount on line 33c.

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation.

Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. .....

\$\_\_\_\_\_0.00

Copy net Vehicle 2

0.00

expense here

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

0.00

0.00

13f. Net Vehicle 2 ownership or lease expense

	er Necessary Expenses	the following IRS categori		s listed above	e, you are allowed your monthly expenses	s for	
16.	self-employment taxes, so from your pay for these tax	cial security taxes, and Medices. However, if you expect er from the total monthly ar	dicare taxes to receive	s. You may in a tax refund,	nd local taxes, such as income taxes, clude the monthly amount withheld you must divide the expected refund by pay for taxes.	\$	0.00
17.	Involuntary deductions:	The total monthly payroll de	eductions th	nat your job re	equires, such as retirement	· <u> </u>	
	contributions, union dues, Do not include amounts th		job, such a	s voluntary 40	01(k) contributions or payroll savings.	\$	0.00
18.	filing together, include pay	ments that you make for yo or life insurance on your de	our spouse's	s term life ins	fe insurance. If two married people are urance. g spouse's life insurance, or for any form	\$	0.00
19.	• • • • • • • • • • • • • • • • • • • •	h as spousal or child suppo	ort paymen	ts.	by the order of a court or  You will list these obligations in line 35.	\$	0.00
20.	Education: The total mon	hly amount that you pay fo	r education	that is either	required:		
	as a condition for your j	ob, or					
	for your physically or m	entally challenged depende	ent child if n	o public educ	cation is available for similar services.	\$	0.00
21.	<b>Childcare:</b> The total mont preschool.	nly amount that you pay for	r childcare,	such as baby	sitting, daycare, nursery, and	Φ.	0.00
	• •	or any elementary or secon	•			\$	0.00
22.	that is required for the hea	penses, excluding insura th and welfare of you or yon t. Include only the amount	our depende	ents and that i	r amount that you pay for health care is not reimbursed by insurance or paid all entered in line 7.		
	,	nce or health savings acco				\$	0.00
23.	services for you and your obusiness cell phone service production of income, if it is Do not include payments for the services of the services	dependents, such as pagers	s, call waiti for your hea mployer.	ng, caller ider alth and welfa	you pay for telecommunication ntification, special long distance, or re or that of your dependents or for the		
	expenses, such as those r	eported on line 5 of Official			nount you previously deducted.	+\$	0.00
24.	Add all of the expenses a	•	Form 1220	C-1, or any an		<b>+</b> \$ \$	3,981.00
		illowed under the IRS exp	Pense allow I deductions	vances.  s allowed by the	nount you previously deducted. É		
Add	Add all of the expenses a Add lines 6 through 23. litional Expense Deduction Health insurance, disabil	ns These are additional Note: Do not include ity insurance, and health	pense allow I deductions any expen savings a	c-1, or any an vances. s allowed by the se allowances	nount you previously deducted. É	\$	
Add	Add all of the expenses a Add lines 6 through 23. litional Expense Deduction Health insurance, disabilinsurance, disabilinsurance, disability insurance	ns These are additional Note: Do not include ity insurance, and health	pense allow I deductions any expen savings a	c-1, or any an vances. s allowed by the se allowances	he Means Test. s listed in lines 6-24.  nses. The monthly expenses for health	\$	
Add	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disabilinsurance, disability insurary your dependents.	ns These are additional Note: Do not include ity insurance, and health	pense allow deductions any expen savings accounts that	vances.  s allowed by the se allowances.  ccount expentage are reasonable.	he Means Test. s listed in lines 6-24.  nses. The monthly expenses for health	\$	
Add	Add all of the expenses a Add lines 6 through 23. litional Expense Deduction Health insurance, disabilities insurance, disability insurance, your dependents. Health insurance	ns These are additional Note: Do not include ity insurance, and health	pense allow I deductions any expen savings accounts that	vances. s allowed by the se allowances ccount expension are reasonable.	he Means Test. s listed in lines 6-24.  nses. The monthly expenses for health	\$	
Add	Add all of the expenses a Add lines 6 through 23.  itional Expense Deduction  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance	ns These are additional Note: Do not include ity insurance, and health	pense allow deductions any expen savings accounts that \$	vances. s allowed by the se allowances. ccount experiment are reasonals  0.00  0.00	he Means Test. s listed in lines 6-24.  nses. The monthly expenses for health	\$	
Add	Add all of the expenses a Add lines 6 through 23.  litional Expense Deduction  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this	ns These are additional Note: Do not include ity insurance, and health nce, and health savings ac	pense allow deductions a any expen savings as counts that  \$ + \$	vances. s allowed by the se allowances are reasonate 0.00 0.00 0.00	he Means Test. s listed in lines 6-24.  nses. The monthly expenses for health oly necessary for yourself, your spouse, o	\$ \$	3,981.00
Add	Add all of the expenses a Add lines 6 through 23.  litional Expense Deduction  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this	These are additional Note: Do not include ity insurance, and health nce, and health savings actotal amount?	pense allow deductions a any expen savings as counts that  \$ + \$	vances. s allowed by the se allowances are reasonate 0.00 0.00 0.00	he Means Test. s listed in lines 6-24.  nses. The monthly expenses for health oly necessary for yourself, your spouse, o	\$ \$	3,981.00
Add: 25.	Add all of the expenses a Add lines 6 through 23. iitional Expense Deduction  Health insurance, disability insurance, disability insurance your dependents. Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this  No. How much do  Yes  Continued contributions continue to pay for the rea of your household or mem	These are additional Note: Do not include ity insurance, and health nce, and health savings actually spend?  to the care of household sonable and necessary care	deductions any expense arrows are counts that  + \$  for family reand supply who is ur	vances. s allowed by the se allowances are reasonable of the second of t	he Means Test. s listed in lines 6-24.  nses. The monthly expenses for health oly necessary for yourself, your spouse, of the company of the	\$ \$	3,981.00
25. 26.	Add all of the expenses a Add lines 6 through 23. iitional Expense Deduction  Health insurance, disability insurance, disability insurance your dependents. Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this No. How much do yes  Continued contributions continue to pay for the rea of your household or mem may include contributions. Protection against family	These are additional Note: Do not include ity insurance, and health nce, and health savings actually spend?  to the care of household sonable and necessary carber of your immediate familio an account of a qualified a violence. The reasonably	pense allow deductions any expen savings accounts that	vances.  s allowed by the seallowances are reasonated are reasonat	he Means Test. s listed in lines 6-24.  nses. The monthly expenses for health oly necessary for yourself, your spouse, of the company of the	\$\$	0.00

	John M Hughes Leona E Hughes	Case number (if known)				
28.	Additional home energy costs. Your hom allowance on line 8.	ne energy costs are included in your non-mortgage housing a	and utilities			
	If you believe that you have home energy of line 8, then fill in the excess amount of home	costs that are more than the home energy costs included in energy costs	expenses on			
	You must give your case trustee documen amount claimed is reasonable and necess	tation of your actual expenses, and you must show that the a	additional		\$	0.00
		dren who are younger than 18. The monthly expenses (not expendent children who are younger than 18 years old to attention		r		
	You must give your case trustee document claimed is reasonable and necessary and	tation of your actual expenses, and you must explain why the not already accounted for in lines 6-23.	e amount			
	* Subject to adjustment on 4/01/16, and ev	ery 3 years after that for cases begun on or after the date of	adjustment.		\$	0.00
		the monthly amount by which your actual food and clothing egallowances in the IRS National Standards. That amount cases in the IRS National Standards.		)		
		tional allowance, go online using the link specified in the sep so be available at the bankruptcy clerk's office.	arate			
	You must show that the additional amount	claimed is reasonable and necessary.			\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	e amount that you will continue to contribute in the form of ca anization. 11 U.S.C. § 548(d)3 and (4).	ash or financi	al		
	Do not include any amount more than 15%	of your gross monthly income.		_	\$	0.00
	Add all of the additional expense deduc Add lines 25 through 31.	tions		\$	<b>.</b>	0.00
Ded	uctions for Debt Payment					
	Fo calculate the total average monthly paym creditor in the 60 months after you file for ba Mortgages on your home	nent, add all amounts that are contractually due to each secunkruptcy. Then divide by 60.	ıred			
33a.					/erage m	onthly
	Copy line 9b here		=>	pa	verage m nyment	
			=>		_	0.00
33h	Loans on your first two vehicles			pa	_	0.00
33b.	Loans on your first two vehicles Copy line 13b here		=>	pa	_	0.00
33c.	Loans on your first two vehicles Copy line 13b here Copy line 13e here		=>	pa	_	0.00
33c. 33d.	Loans on your first two vehicles Copy line 13b here	Identify property that secures the debt  Do inc	=>	pa	_	0.00
33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	Identify property that secures the debt  Do inc	=> pes payment clude taxes insurance?	pa	_	0.00
33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	Identify property that secures the debt  incor	=> es payment clude taxes insurance?	pa	_	0.00
33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: se of each creditor for other secured debt	Identify property that secures the debt  Do inc or	=> pes payment clude taxes insurance? No Yes	\$ \$ \$ \$	_	0.00
33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: se of each creditor for other secured debt	Identify property that secures the debt  Do inc or	=> pes payment clude taxes insurance? No Yes No	\$ \$ \$ \$	_	0.00
33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: se of each creditor for other secured debt	Identify property that secures the debt  Do inc or	=> Des payment blude taxes insurance? No Yes No Yes	\$ \$ \$ \$ \$	_	0.00
33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: se of each creditor for other secured debt	Identify property that secures the debt  Do inc or	=> ces payment clude taxes insurance? No Yes No Yes No	\$ \$ \$ \$ \$	_	0.00

	debts that you listed in lin property necessary for yo				€,					
_	Go to line 35.		•							
	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill i	ssession of your property								
Name of the	creditor	Identify property that sec	ures the debt		Tot	al cure amount			onthly cu	ıre
-NONE-				\$			÷ 60 =		nount	
							_	•		
				Total	\$_	0.00	tota her		\$	0.00
	owe any priority claims - s past due as of the filing d									
■ No.	Go to line 36.									
☐ Yes.	Fill in the total amount of a ongoing priority claims, su			de current or						
	Total amount of all past-o	due priority claims			\$_	0.00	÷	60	\$	0.00
36. Projecte	d monthly Chapter 13 plar	n payment			\$_					
Office of the Exec To find a li	Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.									
Average	monthly administrative expe	ense			\$	\$	Copy here=			
	of the deductions for deb es 33e through 36.	t payment.							\$	0.00
Total Deduc	tions from Income									
38. Add all d	of the allowed deductions.									
	ne 24, All of the expenses a e allowances		\$	3,981.00	)					
	ne 32, All of the additional e.			0.00	)					
Copy lir	ne 37, All of the deductions	for debt payment	+\$	0.00	<u> </u>					
Total de	eductions		\$	3,981.00	) —	Copy total here=>		Ç	§	3,981.00

Debtor 1 Debtor 2 John M Hughes Leona E Hughes Case number (if known)

ant 2	etermine to	ur Disposable income Under 11 U.S.C. § 1.	325(D)(Z)			
		rrent monthly income from line 14 of Form Current Monthly Income and Calculation o				\$ 6,888.44
<b>childre</b> disabilit receive	en. The month ty payments f d in accordar	bly necessary income you receive for supp hly average of any child support payments, fo for a dependent child, reported in Part I of For nce with applicable nonbankruptcy law to the pended for such child.	ster care payments, or 122C-1, that you	or	\$0	.00
employ in 11 U	er withheld fr .S.C. § 541(b	retirement deductions. The monthly total of orm wages as contributions for qualified retire (b)(7) plus all required repayments of loans from C. § 362(b)(19).	ment plans, as speci	fied	\$0	.00
42. Total o	f all deduction	ons allowed under 11 U.S.C. § 707(b)(2)(A).	Copy line 38 here	=>	\$ 3,981	.00
expens their ex	es and you h penses. You	cial circumstances. If special circumstances have no reasonable alternative, describe the symust give your case trustee a detailed explar documentation for the expenses.	pecial circumstances	and		
Describe t	he special ci	ircumstances	Amount of ex	pens	se	
			\$			
			<u> </u>			
			\$			
			\$			
		Total	\$0.00	•	Copy here=>\$	0.00
44. Total a	djustments.	Add lines 40 through 43.	=>	\$_	3,981.00	Copy here=> -\$ 3,981.00
	•	nthly disposable income under § 1325(b)(2	). Subtract line 44 fro	m lin	e 39.	\$
46. <b>Chang</b> have change time you file	e in income nanged or are our case will b d your petitio	or expenses. If the income in Form 122C-1 or every virtually certain to change after the date you be open, fill in the information below. For examon, check 122C-1 in the first column, enter line I in when the increase occurred, and fill in the	filed your bankruptcy aple, if the wages rep 2 in the second colu	petion ortection, o	tion and during the I increased after	
Form	Line	Reason for change	Date of chan	ge	Increase or decrease?	Amount of change
☐ 122C-1 ☐ 122C-2 ☐ 122C-1 ☐ 122C-2 ☐ 122C-1 ☐ 122C-2 ☐ 122C-1					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase ☐ Decrease ☐ Increase	\$ \$ \$
☐ 122C-2					□ Decrease	\$

Debtor 1 Debtor 2	John M Hughes Leona E Hughes		Case number (if known)			
Part 4:	Sign Below					
E	By signing here, under penalty of perjury you declare that the infor	matio	n on this statement and in any attachments is true and correct.			
	/s/ John M Hughes John M Hughes Signature of Debtor 1	Х	/s/ Leona E Hughes Leona E Hughes Signature of Debtor 2			
	January 20, 2016 MM / DD / YYYY	Date	January 20, 2016			

Debtor 1	John M Hughes
Debtor 2	Leona E Hughes

Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 07/01/2015 to 12/31/2015.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Acme

Income	by	Month:
--------	----	--------

6 Months Ago:	07/2015	\$5,339.55
5 Months Ago:	08/2015	\$3,918.03
4 Months Ago:	09/2015	\$3,966.23
3 Months Ago:	10/2015	\$4,269.65
2 Months Ago:	11/2015	\$3,851.96
Last Month:	12/2015	\$3,888.96
	Average per month:	\$4,205.73

Debtor 1	John M Hughes		
	Leona E Hughes	Case number (if known)	

### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 07/01/2015 to 12/31/2015.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Virtua Memorial Hospital

Income by Month:

6 Months Ago:	07/2015	\$2,524.30
5 Months Ago:	08/2015	\$2,404.03
4 Months Ago:	09/2015	\$2,523.07
3 Months Ago:	10/2015	\$3,655.13
2 Months Ago:	11/2015	\$2,473.63
Last Month:	12/2015	\$2,516.09
	Average per month:	\$2,682.71

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing tee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# **United States Bankruptcy Court**District of New Jersey

In r	John M Hughes  E Leona E Hughes		Case No.	
	Leona E nuglies	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPI	ENSATION OF ATTOI	RNEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	0.00
	Prior to the filing of this statement I have received			0.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed con	npensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n			
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankruptcy c	ease, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and ren</li> <li>b. Preparation and filing of any petition, schedules, st</li> <li>c. Representation of the debtor at the meeting of cred</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on h</li> </ul>	atement of affairs and plan which itors and confirmation hearing, and preduce to market value; ex- tions as needed; preparation	n may be required; and any adjourned hea emption planning	rings thereof;
6.	By agreement with the debtor(s), the above-disclosed to Representation of the debtors in any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
	January 20, 2016	/s/ William B. Sar	nderson, Jr.	
_	Date	William B. Sande Signature of Attorne Spear Wilderman 1040 N. Kings Hig Suite 202	py I PC ghway	
		Cherry Hill, NJ 08 856-428-8799	5034	
		kbrand@spearwi	Iderman.com	
		Name of law firm		

# **United States Bankruptcy Court**District of New Jersey

In re	John M Hughes Leona E Hughes		Case No.	
		Debtor(s)	Chapter	13
	VER	RIFICATION OF CREDITOR	MATRIX	
Γhe ab	ove-named Debtors hereby verify	that the attached list of creditors is true and c	correct to the best of	of their knowledge.
Date:	January 20, 2016	/s/ John M Hughes		
		John M Hughes		
		Signature of Debtor		
Date:	January 20, 2016	/s/ Leona E Hughes		
		Leona E Hughes		
		Signature of Debtor		

Associated Credit P.O. Box 5171 Westborough, MA 01581-5171

Bank of America P.O. Box 15713 Wilmington, DE 19886-5713

Capitol One Bank P.O. Box 30287 Salt Lake City, UT 84130-0287

Client Services 3451 Harry S Truman Blvd Saint Charles, MO 63301-4047

Credit First N.A. P.O. Box 81344 Cleveland, OH 44188

Credit One Bank
P.O. Box 60500
City of Industry, CA 91716

Delbert Services P.O. Box 4730 Anaheim, CA 92803

Discover c/o Pressler & Pressler, LLP 7 Entin Rd. Parsippany, NJ 07054

Firestone Complete Auto Care P.O. Box 81410 Cleveland, OH 44181-0410

Midland Funding c/o Pressler & Pressler, LLP 7 Entin Rd. Parsippany, NJ 07054

National Credit Adjusters P.O. Box 3023 Hutchinson, KS 67504 Seterus P.O. Box 2008 Grand Rapids, MI 49501-2008

Spotloan P.O. Box 927 Palatine, IL 60078-0927

Wells Fargo Dealer Svc P.O. Box 17900 Denver, CO 80212-7900

Wells Fargo Home Mortgage P.O. Box 10335 Des Moines, IA 50306